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## BIB DATA SHEET

CONFIRMATION NO. 4921

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/720,765	11/24/2003 RULE	604	3626	EIS-5799 DIV.1	
<b>APPLICANTS</b> James Martucci, Libertyville, IL; Tuan Bui, Green Oaks, IL; James Hitchcock, Barrington, IL; Aleandro DiGianfilippo, Scottsdale, AZ; Richard Pierce, Glendale, AZ;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 10/043,891 01/11/2002 PAT 6,985,870					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 02/23/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /ROBERT W Acknowledged MORGAN/ Examiner's signature	<input checked="" type="checkbox"/> Met after Allowance RWM Initials	<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWINGS</b> 32	<b>TOTAL CLAIMS</b> 6 9	<b>INDEPENDENT CLAIMS</b> 3 2
<b>ADDRESS</b> K&L Gates LLP P.O. Box 1135 Chicago, IL 60690-1135 UNITED STATES					
<b>TITLE</b> Medication delivery system					
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		